

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ALMAZ		06-11-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	ST	55	5/18/01
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
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3	4/13
4	4/13
5	N
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Claim	Date
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 08-13-01

If more than 150 claims or 10 actions  
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